Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 1 of 32

BI (Official	FORM TICIA		United rthern D								Voluntary	Petition
	ebtor (if ind Health Int						Name	of Joint De	ebtor (Spouse	e) (Last, First	, Middle):	
	All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):					All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):						
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)  32-0155861					our digits o		r Individual-	Taxpayer I.D. (ITIN) No	o./Complete EIN			
Street Addre 28369 D Unit #40	ess of Debto Davis Parl 01	,	Street, City,	and State)	):	ZID Code		Address of	f Joint Debtor	r (No. and St	reet, City, and State):	ZID Code
Warren	Warrenville, IL ZIP Code 60555				:					ZIP Code		
County of R  Dupage	Residence or	of the Prin	cipal Place	of Busines			Coun	y of Reside	ence or of the	Principal Pl	ace of Business:	
_	dress of Deb unty Line	,	erent from st	reet addre	ss):		Mailin	ng Address	of Joint Debt	tor (if differe	nt from street address):	
'''					_	ZIP Code	:					ZIP Code
Location of (if different	Principal A from street			or		60502						
(Form of Organization) ((Check one box)			(Checlustrian (C	eal Estate as 101 (51B)		☐ Chapt☐ Chapt☐ Chapt☐ Chapt☐ Chapt☐	the 1 der 7 der 9 der 11 der 12	Petition is Fi	hapter 15 Petition for Ro a Foreign Main Procee hapter 15 Petition for Ro a Foreign Main Procee hapter 15 Petition for Ro a Foreign Nonmain Procee	ecognition ding ecognition		
check this	s box and stat			☐ Deb und Cod	Tax-Exe (Check box otor is a tax- er Title 26	empt Entity k, if applicable exempt orgof the Unite mal Revenu	e) ganization ed States	defined "incurr	are primarily co d in 11 U.S.C. sed by an indivi onal, family, or	(Check onsumer debts, § 101(8) as idual primarily household pur	k one box)  Debts busine	are primarily ess debts.
<b>-</b> B 11 B'11'		Ü	ee (Check o	one box)				one box:		Chapter 11		101(51D)
■ Full Filing Fee attached  □ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  □ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.					tor Check	Debtor is a if: Debtor's a to insiders all applica A plan is Acceptance	aggregate not a sor affiliates; ble boxes: being filed wces of the pla	ncontingent 1 are less than with this petition were solici	s defined in 11 U.S.C. § or as defined in 11 U.S.C. iquidated debts (excludin \$2,190,000.  on. ted prepetition from one with 11 U.S.C. § 1126(b	C. § 101(51D).  Ing debts owed  e or more		
☐ Debtor e	Administrates that estimates that estimates that ill be no fund	t funds will it, after any	l be available exempt pro	perty is ex	cluded and	administrat		es paid,		THIS	S SPACE IS FOR COURT	USE ONLY
Estimated N	Number of C	reditors  100- 199	□ 200- 999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated A	Assets \$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,000 to \$500 million	\$500,000,001 to \$1 billion				
Estimated L  \$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,000 to \$500 million	\$500,000,001 to \$1 billion				

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 2 of 32

Page 2 Name of Debtor(s): Voluntary Petition Rardin Health Integrative Family Medicine, Inc. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. Signature of Attorney for Debtor(s) (Date) Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) ☐ Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

### B1 (Official Form 1)(1/08)

## **Voluntary Petition**

(This page must be completed and filed in every case)

Name of Debtor(s):

Rardin Health Integrative Family Medicine, Inc.

### Signatures

## Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X Signature of Debtor

*G* .....

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

#### Signature of Attorney\*

#### X /s/ Kent A. Gaertner

Signature of Attorney for Debtor(s)

#### Kent A. Gaertner 3121489

Printed Name of Attorney for Debtor(s)

#### Springer, Brown, Covey, Gaertner & Davis, L.L.C.

Firm Name

400 S. County Farm Road Suite 330 Wheaton, IL 60187

Address

#### 630-510-0000 Fax: 630-510-0004

Telephone Number

## May 22, 2008

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

## $\mathbf{X}$ /s/ Sean Rardin M.D.

Signature of Authorized Individual

#### Sean Rardin M.D.

Printed Name of Authorized Individual

#### Sole Shareholder, Director and Officer

Title of Authorized Individual

May 22, 2008

Date

#### Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 4 of 32

B6 Summary (Official Form 6 - Summary) (12/07)

## **United States Bankruptcy Court** Northern District of Illinois, Eastern Division

In re	Rardin Health Integrative Family Medicine, Inc.	Case No.
•	Debtor	<del>,</del>
		Chapter <b>7</b>
		•

## **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	5	21,329.80		
C - Property Claimed as Exempt	No	0			
D - Creditors Holding Secured Claims	Yes	1		735,554.71	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	2		59,429.48	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
- Current Income of Individual Debtor(s)	No	0			N/A
J - Current Expenditures of Individual Debtor(s)	No	0			N/A
Total Number of Sheets of ALL Schedu	ıles	12			
	To	otal Assets	21,329.80		
			Total Liabilities	794,984.19	

Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Case 08-13082 Page 5 of 32 Document

Form 6 - Statistical Summary (12/07)

## **United States Bankruptcy Court** Northern District of Illinois, Eastern Division

;	Rardin Health Integrative Family Medicine, Inc.		Case No.	
		Debtor	Chapter	7
	STATISTICAL SUMMARY OF CERTAIN	LIABILITIES A	ND RELATED DA	TA (28 U.S.C. § 1
If a	you are an individual debtor whose debts are primarily consume case under chapter 7, 11 or 13, you must report all information	ner debts, as defined in § requested below.	101(8) of the Bankruptcy (	Code (11 U.S.C.§ 101(8
	☐ Check this box if you are an individual debtor whose debts report any information here.	s are NOT primarily cons	sumer debts. You are not re	equired to
T	his information is for statistical purposes only under 28 U.S	.C. § 159.		
S	ummarize the following types of liabilities, as reported in the	e Schedules, and total th	nem.	
	Type of Liability	Amount		
	Domestic Support Obligations (from Schedule E)			
	Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)			
	Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)			
	Student Loan Obligations (from Schedule F)			
	Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E			
	Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	8		
	TOTAL			
	State the following:			
	Average Income (from Schedule I, Line 16)			
Ī	Average Expenses (from Schedule J, Line 18)			
	Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)			
	State the following:			
	1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column			
l	2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column			
	3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column			
	4. Total from Schedule F			
r	5. Total of non-priority unsecured debt (sum of 1, 3, and 4)			

101(8)), filing

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 6 of 32

B6A (Official Form 6A) (12/07)

In re	Rardin Health Integrative Family Medicine, Inc.		Case No.
-	naram meanin megranie ramin, meaneme, mei	Debtor,	Cust 110.

### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Current Value of Debtor's Interest in Property, without Deducting any Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00** 

(Report also on Summary of Schedules)

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 7 of 32

B6B (Official Form 6B) (12/07)

In re	Rardin Health Integrative Family Medicine, Inc.	Case No.	
	D	ehtor	

## SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	X			
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Checki Bank .	ing account #0009170462 located at Harris	-	123.80
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, including audio, video, and computer equipment.	X			
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.	X			
7.	Furs and jewelry.	X			
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issuer.	X			

Sub-Total > (Total of this page)

123.80

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Page 8 of 32 Document

 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

In re	Rardin Health Integrative Family Medicine, Inc.			Case No.
,		Debtor	-,	

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

			(Continuation Sheet)		
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	x			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
				Sub-Tota	al > <b>0.00</b>
			(To	otal of this page)	

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 9 of 32

 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

In re Rardin Health Integrative Family Medicine, Inc.	Case No.
---	----------

Debtor

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	X			
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	See list a	ttached	-	21,206.00
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > 21,206.00 (Total of this page)

Total >

21,329.80

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

wood chairs	Quantity	Liquidatio	on Value 3000	Location waiting room
Weight Lifting Bench	;	1	30	conference
Conference Table	:	2	100	conference
Bookshelves Lighting Desk Chairs Medical Stools Yoga Mats Computers Printer Fax Scanner Misc Computer Equip Wood File Drawers	1	4 2 1 3 0 2 1 1 1 3 3	400 100 100 150 20 200 200 100 50 200	office/confer waiting/offic. front desk treatment conference front desk front desk front desk conference
Canvas Wall Art Telephone Refrigerator microwave Bose speaker couch Banyan Stat Kits		8 3 2 1 1 1	500 100 500 100 300 1000 1150	walls front/office office office office office procedure
Coat Hook		1	100	conference
Xray view box portable oxygen unit eye chart wheel chair		1 1 1	160 188 45 90	procedure procedure procedure procedure
integrated diagnostic syste vag illumination system anoscope illumination syste ear wash system vital signs monitor 300 ser	em	1 1 1 1	699 80 199 147 1600	procedure procedure procedure procedure treatment
episcope set otoscope thermoscan therm scale digital patient		1 1 1	240 62 60 157	treatment treatment treatment procedure
scale digital baby wall mount height rod Exam table knee crutches s/s pan		1 1 1 2	124 39 490 425 27	procedure procedure treatment treatment procedure
procto rest rear storage pod IQ spirometer usb		1 1 1	187 50 780	treatment treatment procedure

Case 08-13082 Doc 1	Filed 05/22/08 Document	Entered 05/22/08 Page 11 of 32	3 15:45:05 Desc Mai
iQmark digital ECG AED -20 Defibrillation mod waste cans Automatic hi/lo exam table Conference chairs ladder shredder	1 1 8 1 10 1	1500 1495 20 2300 100 100	procedure procedure off/proced/t procedure conference conference front desk
wood bench computer stand wood lamp table toaster blender storage bench microscope mayo stand	1 1 1 1 1 1 1	300 150 300 10 10 10 360 62	waiting room procedure waiting room office office bathroom procedure procedure

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 12 of 32

B6D (Official Form 6D) (12/07)

•		
In re	Rardin Health Integrative Family Medicine, Inc.	Case No
		·

Debtor

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	1	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COXT - ZGEZ	UNLLQULDA	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. PLP 9097484006  C.I.T. Small Business Lending Corp. 640 Plaza Dr.			9/13/05 Blanket lien on equipment Medical Equipment and Furniture located at Debtor's office. This creditor	Τ̈́	D A T E D			
Suite #200 Highlands Ranch, CO 80129	x	-	is additionally secured by other collateral not owned by this Debtor.					
Account No. <b>017-1029319-001</b>	╀	H	Value \$ 21,206.00 2005	H			540,722.95	519,516.95
Leaf Financial Services One Commerce Sq. 2005 Market St. 15th Floor Philadelphia, PA 19103	x	_	Secondary lien on medical equipment and furiture  Medical equipment and furniture located at Debtor's office.					
			Value \$ 59,231.00				139,302.96	139,302.96
Account No. 600-0062610-000			4/2007					
U.S. Bank Manifest Funding Services 1450 Channel Pkwy. Marshall, MN 56258	x	-	Disputed Equipment Lease Per Disputed Lease			X		
			Value \$ Unknown				55,528.80	Unknown
Account No.			Value \$					
continuation sheets attached	_	<u>.                                    </u>	(Total of t	Subt			735,554.71	658,819.91
Total (Report on Summary of Schedules) 735,554.71 658,819.91								

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Page 13 of 32 Document

B6E (Official Form 6E) (12/07)

In re	Rardin Health Integrative Family Medicine, Inc.	Case No	
	Debto	or	

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to

priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
$\square$ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).
anomer substance. If C.B.C. 3 50/(a)(10).

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 14 of 32

B6F (Official Form 6F) (12/07)

In re	Rardin Health Integrative Family Medicine, Inc.		Case No.	
		Debtor		

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	CO	Н	sband, Wife, Joint, or Community	Co	U N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J C H		NT I NG E N	UNLIQUIDAT	SPUTED	AMOUNT OF CLAIM
Account No. 5584-1892-0009-0458			2007 to 3/2008	٦Ÿ	ΙE	1	
Advanta Customer service P.O. 30715 Salt Lake City, UT 84130-0715		_	Operating Expenses		D		2,752.87
Account No. <b>3764-301946-71002</b>			2/07 to 2/08	+			,
American Express Business P.O. Box 0001 Los Angeles, CA 90096-0001		_	Operating Expenses				4,026.26
Account No. 4003-4470-1315-8276  Capital One Bank P.O. Box 5294  Carol Stream, IL 60197-5294		_	9/07 to 2/08 Operating expenses and debt consolidation				16,523.06
Account No. 4246-3151-2076-0275  Chase Business Visa P.O. Box 94014 Palatine, IL 60094-4014		-	5/05 to 11/07 Operating expenses				
							12,308.64
_1 continuation sheets attached		<u> </u>	(Total of	Sub			35,610.83

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 15 of 32

 $B6F\ (Official\ Form\ 6F)\ (12/07)$  - Cont.

In re	Rardin Health Integrative Family Medicine, Inc.		Case No	
-		Debtor	,	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	Ü	P	
MAILING ADDRESS	CODEBTOR	н		CONTINGEN	ĮË.	DISPUTE	
INCLUDING ZIP CODE,	В	W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	H	ď	υ	
AND ACCOUNT NUMBER	T	C	IS SUBJECT TO SETOFF, SO STATE.	N G	ľ	ΙT	AMOUNT OF CLAIM
(See instructions above.)	R	ľ		E	D	D	
Account No. 4225-8750-0117-8447			3/07 to 3/08	7 ï	DATED		
	ł		Operating Expenses		<u>5</u>		
Chase Visa						Π	
January 1164	Х	-					
							Unknown
							Olikilowii
Account No. 5474-8727-5016-6074			9/05 to 2/08				
	1		Operating expenses				
CIT Mastercard							
P.O. Box 15710		-					
Wilmington, DE 19886-5710							
							14,307.40
							14,307.40
Account No. <b>5242-1806-2896-0574</b>			1/07 to 1/08				
	1		Operating Expense				
Citi							
	Х	-					
							Unknown
				┖			Olikilowii
Account No. #559105764			3/07 to 3/08				
	1		Operating Expenses				
Harris Bank							
P.O. Box 6201		-					
Carol Stream, IL 60197-6201							
, ,							
							9,511.25
						_	5,511.25
Account No.							
						1	
						1	
		<u> </u>				<u>.                                    </u>	
Sheet no. <u>1</u> of <u>1</u> sheets attached to Schedule of				Sub			23,818.65
Creditors Holding Unsecured Nonpriority Claims			(Total of	his	pag	ge)	23,010.03
				7	ota	1	
			(Report on Summary of So				59,429.48
			(Report on Summary of Se	1110	ıuıt	JS)	1

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 16 of 32

B6G (Official Form 6G) (12/07)

In re	Rardin Health Integrative Family Medicine, Inc.		Case No.	
_			•	
		Debtor		

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

U.S. Bank Manifest Funding Services 1450 Channel Pkwy. Marshall, MN 56258 Disputed Lease of Equipment. Creditor claims to own equipment belonging to Debtor. However, the equipment was owned by Debtor prior to Debtor requesting a loan from creditor and was subject to prior liens to C.I.T. and Leaf Financial. Said creditors had UCC-1 filings on all assets at the time of the U.S. Bank loan. U.S. Bank sent loan proceeds checks to medical equipment suppliers and furniture suppliers (who had already been paid for the equipment by C.I.T. and Leaf). These suppliers were then directed to turn the checks over to Debtor for working capital. Thereafter U.S. Bank claimed ownership of the equipment.

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Page 17 of 32 Document

B6H (Official Form 6H) (12/07)

In re	Rardin Health Integrative Family Medicine, Inc.		Case No.	
		Debtor	,	

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Carrie Rardin Same as above	Leaf Financial Services One Commerce Sq. 2005 Market St. 15th Floor Philadelphia, PA 19103
Carrie Rardin Same as Above	U.S. Bank Manifest Funding Services 1450 Channel Pkwy. Marshall, MN 56258
Carrie Rardin 786 County Line Rd. Aurora, IL 60502 Personal Guarentee	C.I.T. Small Business Lending Corp. 640 Plaza Dr. Suite #200 Highlands Ranch, CO 80129
Sean Rardin 786 County Line Rd. Aurora, IL 60502	Leaf Financial Services One Commerce Sq. 2005 Market St. 15th Floor Philadelphia, PA 19103
Sean Rardin 786 County Line Rd. Aurora, IL 60502	U.S. Bank Manifest Funding Services 1450 Channel Pkwy. Marshall, MN 56258
Sean Rardin 786 County Line Rd. Aurora, IL 60502	Chase Visa
Sean Rardin 786 County Line Rd. Aurora, IL 60502	Citi

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 18 of 32

B6 Declaration (Official Form 6 - Declaration). (12/07)

## **United States Bankruptcy Court** Northern District of Illinois, Eastern Division

In re	Rardin Health Integrative Family Medicine, Inc.			Case No.	
			Debtor(s)	Chapter	7
	DECLARATION CO	ONCERN	NING DEBTOR'S SO	CHEDUL	ES
	DECLARATION UNDER PENALTY OF	PERJURY	ON BEHALF OF CORPO	ORATION (	OR PARTNERSHIP
	I, the Sole Shareholder, Director and Officer of the corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief.				
Date	May 22, 2008	Signature	/s/ Sean Rardin M.D. Sean Rardin M.D. Sole Shareholder, Dire	ctor and Of	ficer

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 19 of 32

B7 (Official Form 7) (12/07)

## United States Bankruptcy Court Northern District of Illinois, Eastern Division

In re	Rardin Health Integrative Family Medicine, Inc.		Case No.	
		Debtor(s)	Chapter	7

### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE \$12,045.00 2006 Gross receipts \$49,505.00 2007 Gross receipts \$0.00 2008 Gross receipts

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL OF CREDITOR PAYMENTS AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
TRANSFERS TRANSFERS OWING
2/15, and 3/15, 2008 \$5,120.14 \$540,722.95

NAME AND ADDRESS OF CREDITOR C.I.T. Small Business Lending

See Sch. D

None c. *All debtors*: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

AMOUNT STILL

RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

OWING

2

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT COURT OR AGENCY STATUS OR AND CASE NUMBER NATURE OF PROCEEDING AND LOCATION DISPOSITION

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

3

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION,
FORECLOSURE SALE,
TRANSFER OR RETURN
DESCRIPTION AND VALUE OF
PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION

NAME AND ADDRESS OF COURT DATE OF DESCRIPTION AND VALUE OF OF CUSTODIAN CASE TITLE & NUMBER ORDER PROPERTY

OF CUSTODIAN CASE TITLE & NUMBER ORDER PROPERT

7. Gifts

None

Unknown

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION Ron Paul Campain RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

None 09/2007 \$2,300.00

8. Losses

O. LOSS

None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or** since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both

spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

Wheaton, IL 60187

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Springer, Brown, Covey, Gaertner & Davis 400 S. County Farm Rd.

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 3/14/08 and 4/10/08 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$4,799.00

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE. RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER. AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

NAME AND ADDRESS OF INSTITUTION

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF **PROPERTY** 

LOCATION OF PROPERTY

## Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 23 of 32

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

■ Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

■ the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

5

#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS

**BEGINNING AND** NATURE OF BUSINESS

**ENDING DATES** 

6

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

**NAME ADDRESS** 

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None П

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS DATES SERVICES RENDERED

Linda Butler 2006 and 2007

2 S. 411 Riverside Av.

Warrenville, IL 60555

Shirley Fancher 2006/2007

Advantage Bookeeping Professionals 1700 Park St. #100 Naperville, IL 60563

Professional Business Consulants. Inc. 2006/2007

903 Commerce Dr. #333 Oak Brook, IL 60523-8723

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME **ADDRESS** DATES SERVICES RENDERED Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 25 of 32

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME Sean Rardin

786 County Line Rd. Aurora, IL 60502

**ADDRESS** 

Parties listed in #19a

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was

issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory,

and the dollar amount and basis of each inventory.

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

DATE OF INVENTORY INVENTORY SUPERVISOR (Specify cost, market

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

VENTURY RECORD

21 . Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE

NAME AND ADDRESS
TITLE

Sean Rardin

President, Shareholder and

NATURE AND PERCENTAGE

OF STOCK OWNERSHIP

100% all issued and outstanding stock

786 County Line Rd. Director Aurora, IL 60502

22 . Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the

commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 26 of 32

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 8

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

#### NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

## DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information and belief.

Date	May 22, 2008	Signature	/s/ Sean Rardin M.D.	
			Sean Rardin M.D.	
			Sole Shareholder, Director and Officer	

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

9

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 28 of 32

United States Bankruptcy Court

Northern District of Illinois, Eastern Division

In re	Rardin Health Integrative Family Medicine,	Inc.	Case No	·	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR D	EBTOR(S)	
c	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy R compensation paid to me within one year before the fixer rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptc	y, or agreed to be p	aid to me, for services reno	
	For legal services, I have agreed to accept		\$	4,500.00	
	Prior to the filing of this statement I have received		\$	4,500.00	
	Balance Due		\$	0.00	
2. \$	S 299.00 of the filing fee has been paid.				
3. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	The source of compensation to be paid to me is:				
	☐ Debtor ☐ Other (specify): <b>Debt</b>	or's sole Shareholder, if ne	cessary		
5. I	■ I have not agreed to share the above-disclosed com	pensation with any other person	unless they are me	mbers and associates of my	law firm.
[	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na				irm. A
a b c	n return for the above-disclosed fee, I have agreed to r a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credi d. [Other provisions as needed]	lering advice to the debtor in del tement of affairs and plan which	termining whether to n may be required;	o file a petition in bankrup	tey;
7. E	By agreement with the debtor(s), the above-disclosed for	ee does not include the following	g service:		
		CERTIFICATION			
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	ny agreement or arrangement for	payment to me for	representation of the debto	or(s) in
Dated	: May 22, 2008	/s/ Kent A. Gaert			=
		Kent A. Gaertner Springer, Brown 400 S. County Fa Suite 330 Wheaton, IL 6018 630-510-0000 Fa	, Covey, Gaertne irm Road 37	r & Davis, L.L.C.	

Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 29 of 32

## United States Bankruptcy Court Northern District of Illinois, Eastern Division

	11	orthern District of Illinois, Eastern	DIVISION	
In re	Rardin Health Integrative Family Medicine, Inc.		Case No.	
		Debtor(s)	Chapter	
	VE	DIEICATION OF CREDITOR	MATDIV	
	V E.	RIFICATION OF CREDITOR	WIATKIA	
		Number of	of Creditors:	20
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of cred	litors is true and	correct to the best of my

Advanta Customer service P.O. 30715 Salt Lake City, UT 84130-0715

American Express Business P.O. Box 0001 Los Angeles, CA 90096-0001

C.I.T. Small Business Lending Corp.
640 Plaza Dr.
Suite #200
Highlands Ranch, CO 80129

Capital One Bank P.O. Box 5294 Carol Stream, IL 60197-5294

Carrie Rardin Same as above

Carrie Rardin Same as Above

Carrie Rardin 786 County Line Rd. Aurora, IL 60502

Chase Business Visa P.O. Box 94014 Palatine, IL 60094-4014

Chase Visa

CIT Mastercard P.O. Box 15710 Wilmington, DE 19886-5710

Citi

Harris Bank P.O. Box 6201 Carol Stream, IL 60197-6201 Leaf Financial Services One Commerce Sq. 2005 Market St. 15th Floor Philadelphia, PA 19103

Sean Rardin 786 County Line Rd. Aurora, IL 60502

Sean Rardin 786 County Line Rd. Aurora, IL 60502

Sean Rardin 786 County Line Rd. Aurora, IL 60502

Sean Rardin 786 County Line Rd. Aurora, IL 60502

U.S. Bank Manifest Funding Services 1450 Channel Pkwy.
Marshall, MN 56258

U.S. Bank Manifest Funding Services 1450 Channel Pkwy. Marshall, MN 56258

Unicyn Financial Companies 10 McKinley St. Ste. #10 P.O. Box 536 Closter, NJ 07624 Case 08-13082 Doc 1 Filed 05/22/08 Entered 05/22/08 15:45:05 Desc Main Document Page 32 of 32

## **United States Bankruptcy Court** Northern District of Illinois, Eastern Division

In re Rardin Health Integrati	ive Family Medicine, Inc.	Case No.
	Debtor(s)	Chapter 7
C	CORPORATE OWNERSHIP STATEMENT	(RULE 7007.1)
	ankruptcy Procedure 7007.1 and to enable the	
or recusal, the undersigned concertifies that the following is a	unsel for <u>Rardin Health Integrative Family Med</u> a (are) corporation(s), other than the debtor or a e of any class of the corporation's(s') equity int	licine, Inc. in the above captioned action, a governmental unit, that directly or
■ None [ <i>Check if applicable</i> ]		
May 22, 2008	/s/ Kent A. Gaertner	
Date	Kent A. Gaertner 3121489	
	Signature of Attorney or Litig	
		ntegrative Family Medicine, Inc.
	Springer, Brown, Covey, Gaer	iner & Davis, L.L.C.
	400 S. County Farm Road Suite 330	
	Wheaton, IL 60187	
	630-510-0000 Fax:630-510-000	4